



Learning About Cancer Together



Artist Statement **Learning About Cancer Together**

A CHR is giving health education to a young man in his teens. The brochures, information sheets, and booklets are all about screening exams, wellness ways, and cancers. I wanted to show that young people are at risk too and most people don't know they can reduce their risk for cancer. That's where the Community Health Representative comes in with education. I know CHRs who give workshops in their communities to raise awareness of cancer, so I wanted to portray their story.

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Paiute-Shoshone
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Wellness Ways: Prevent & Decrease Cancer Risk

Goals & Objectives

Wellness Ways: Prevent & Decrease Cancer Risk

GOALS

Participants will be able to identify cancer risk factors, recognize healthy lifestyle behaviors, and understand the importance of early cancer detection. Recommended screening exams to prevent cancer or decrease cancer risk are discussed.

OBJECTIVES

At the end of this section, each participant will be able to:

DISCUSS healthy choices that decrease cancer risk

IDENTIFY ways to prevent specific cancers

EXPLAIN the importance of early detection for cancer treatment

DISCUSS the barriers and benefits of cancer screening

IDENTIFY screening methods available for specific cancers

KNOW recommended screening guidelines

ANSWER common questions about cancer screening exams and procedures

**Wellness Ways:
Prevent &
Decrease
Cancer Risk**

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*We need to
move from
“I”llness to
“We”llness, from
the individual to
the community.
~anonymous*



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Cancer Risk Factors & Prevention

Check Your Understanding

	TRUE	FALSE
1. A person has no control over their risk of developing cancer.		
2. Tobacco use is the #1 cause of cancer.		
3. Cancer risk increases as you get older.		
4. Obesity is not a risk factor for cancer.		
5. A well balanced diet that includes fruits and vegetables reduces the risk of cancer and other chronic diseases.		

As a CHA/P, BHA, or CHR what are some ways you can help people in your community to learn about cancer risk factors and prevention?



Possibilities include:

- talking **with** people
- helping to schedule recommended screening exams
- having a community health fair
- having a women's wellness tea or luncheon
- having a men's wellness event
- giving a school or community presentation
- inviting the elders to share their traditional wellness stories
- organizing wellness activities that include the youth and the elders
- starting a walking group, dance group, or exercise activity
- supporting ways to reduce exposure to tobacco smoke and encouraging tobacco cessation, including cigarettes and chewing tobacco
- planting a community garden

Cancer Risk Factors & Prevention

Check Your Understanding

If we are to change our behavior, we must first change the way we think. ~ Nancy DeMoss

Cancer Risk Factors & Prevention

Wellness Ways

“Wellness lives in the heart of the community.”
Alaska CHA/P

Making healthy choices may prevent 2 out of 3 cancer deaths.

Cancer Risk Factors & Prevention

This section shares ways to live strong and healthy to prevent cancer or decrease cancer risk. A **risk factor** is anything that increases a person’s chance of developing a disease.

Community conversations about wellness ways are important to support each other in living well throughout our life’s journey. Discuss and share your traditional Native wellness ways and how they help to prevent cancer or decrease cancer risk.

There are 7 wellness choices people can make to reduce their risk of developing cancer. These healthy ways may prevent 2 out of 3 cancer deaths.

1. Enjoy eating traditional plants, berries, and greens. Fill half your plate with a variety of fruits and vegetables. Eat foods low in fat. Drink plenty of water.
2. Choose not to drink alcohol.
3. Choose not to have the habit of smoking or chewing tobacco. Avoid exposure to secondhand smoke.
4. Have fun being active for 30 minutes every day. Maintain a healthy body weight.
5. Protect your skin from the sun’s harmful rays by using sunscreen or wearing protective clothing.
6. Protect against HPV (Human Papilloma Virus).
7. Have recommended cancer screening exams.

Celebrate your wellness ways. Write it down - Tell a friend.

What is one healthy thing you do to take good care of you?
What new ways can you add to support your wellness path?



Assess your risk for cancer and other diseases.

To learn more about "Your Cancer Risk" visit the following websites:

'Understanding Cancer Risk' by NCI
www.understandingrisk.cancer.gov

Center for Cancer Prevention
www.yourdiseaserisk.wustl.edu/

Wellness Ways

The choices we make, what we do, and how we live affect our health and well-being. Healthy lifestyle choices include: eating a well-balanced, healthy diet; maintaining normal body weight; being physically active; avoiding use or exposure to tobacco; drinking alcohol in moderation, if at all; practicing safe sex; protecting our skin from too much sun exposure; managing stress, and having recommended screening exams.

Cancer Risk Factors & Prevention

Living Well

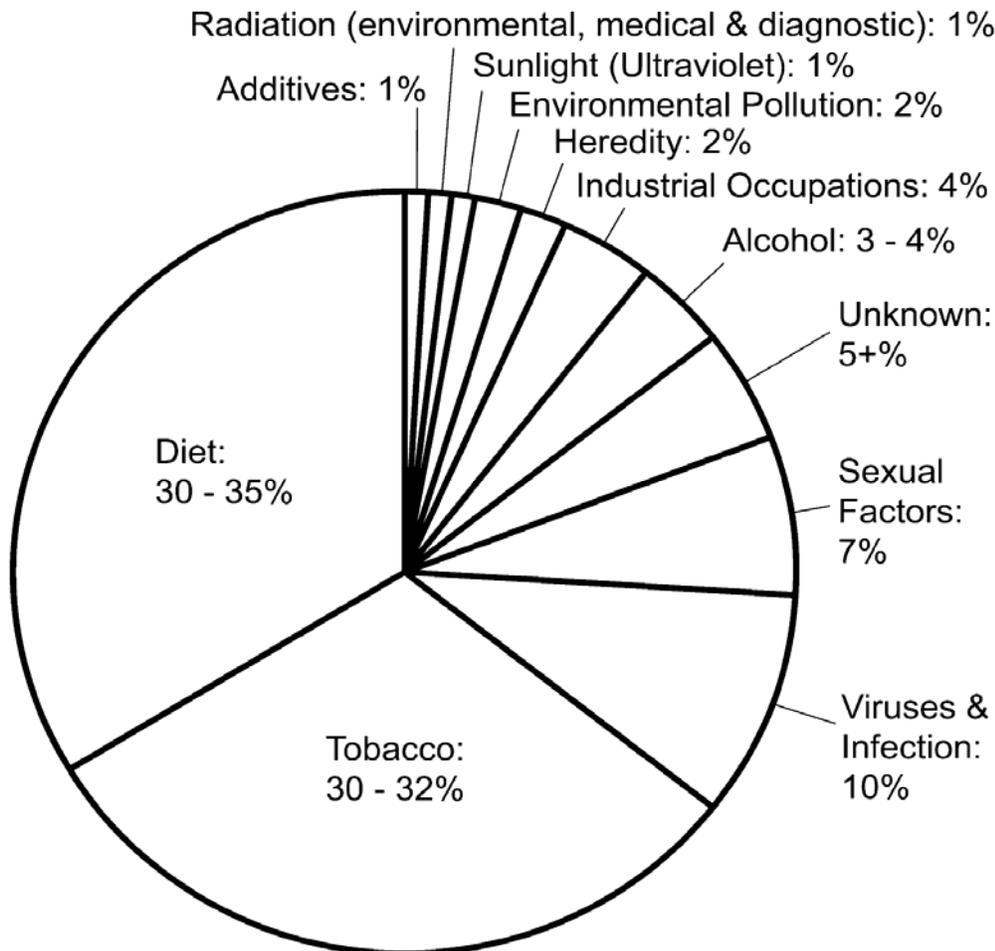
FIGURE 5.1: Cancer Risk Factors with Percentages

Reprinted with permission from Everyone's Guide to Cancer Therapy

Surprise!

Did you know that diet is related to 30-35% of all cancers?

See the chart below.



Cancer Risk Factors & Prevention

Self-Care

Eat at least 5 servings of fruits and vegetables every day.

Five is fine but nine is divine!

Have fun picking berries and greens. Learn about the plants in your area.

Self-Care

As a trusted community member and health representative, self-care is an important part of patient care. Add positive energy to your life by identifying healthy activities that make you feel good, then do more of them everyday.

Ask yourself: What makes you smile? What fills your heart with love? What small things do you enjoy?

Practice healthy ways to cope with stress and anxiety. Increased stress and anxiety over a long period of time can lead to a variety of health problems, affecting your mind, body, and spirit. Stress and anxiety can make you feel tired, decrease your ability to cope, and weaken your natural defenses (the immune system) to fight disease.

Look for ways to live in balance and harmony in body, mind, and spirit. Share stories of wellness. Breathe in slowly, inhaling life's many blessings and breathe out, letting go of stress and tension. Practice slow deep breaths during your day. Make time each day to relax, meditate, exercise, and have fun. Laughter is powerful medicine.

Do at least one healthy activity to take good care of YOU. Before you go to bed tonight, smile knowing you have done at least 1 healthy thing for you.

S.W.E.E.T. Dreams

S - Sleep

W - Water

E - Eat healthy

E - Exercise

T - Think positive thoughts

Nutrition

Today, researchers continue to learn about the connection between good nutrition and good health. Learn about the traditional foods in your area and how they support healthy nutrition. Between 30% - 35% of cancer risk is estimated to be related to an unhealthy diet. **People who are overweight and have a high calorie intake have an increased risk for cancer of the breast, colon, rectum, uterus, kidney, esophagus, and gallbladder.** Many types of cancer may be prevented by eating a healthy diet and maintaining a healthy weight.

Nutrition-related diseases such as heart disease, stroke, cancer, diabetes, and alcoholism are now the leading causes of death among American Indian and Alaska Native people. Obesity is also a significant health concern.

Cancer Risk Factors & Prevention

Nutrition

The following **Dietary Guidelines** issued by the U.S. Departments of Agriculture and Health and Human Services are recommended **to reduce cancer, heart disease, stroke, and diabetes:**

- Eat a variety of foods of different colors. Have a rainbow of colors in your diet. Eat more red, yellow, orange, dark green, and blue fruits and veggies!
- Add fiber to your diet. 3grams of fiber per serving is a good source of fiber.
- Balance the food you eat with physical activity and maintain a healthy weight.
- Eat off a small plate. Be aware of portion size.
- Choose a diet with plenty of plants, vegetables, fruits, berries, greens, and whole grains.
- Choose a diet low in saturated fat and cholesterol. Choose foods that do not have transfat or partially hydrogenated oil.
- Choose a diet low in sugars. 4 g of sugar = 1 teaspoon of sugar. Avoid low-fat or fat-free foods which have large amounts of sugar or salt. Drink water instead of soda pop.
- Choose a diet moderate in salt, less than 2000 mg daily or 2 g daily.
- Steam or bake foods instead of frying.
- Trim fat off meat before cooking.

Read Labels: When buying food, read the label to help make wise choices. The first ingredient listed in the contents is the item with the highest amount in that product. Other ingredients are listed in decreasing order as to the amount in the product. Watch for high amounts of salt or sodium and sugar or sucrose or high fructose corn syrup (HFCS) and transfats (partially hydrogenated vegetable oil). Choose healthier alternatives. Also check to see how many servings are listed in each package.

For a well-balanced meal, divide your plate into quarters or 4 equal parts. One quarter is for carbohydrates or starchy foods such as potatoes, rice, and grains. One quarter is for protein including beans, fish, or game. One half is for plants including fruits, vegetables, berries, and greens.

Alcohol

Drinking alcohol increases the risk for cancer of the liver, breast, larynx, mouth, throat, and esophagus. The risk of developing cancer is greater for people who use tobacco and drink alcohol. From a nutritional point of view, alcohol has negative effects as well. Alcohol keeps the body from burning fat, particularly around the stomach; it has calories, which can add fat to body weight, and it provides no nutrients. If a person has had breast cancer, drinking alcohol increases their risk of recurrence.

Ask elders and people in your community how traditional plants and animal foods are gathered and prepared. What are the medicinal ways plants are used to support wellness?

Cancer Risk Factors & Prevention

Exercise

The ideal physical fitness goal is to exercise for 30 or more minutes every day.

Dance, walk, have fun moving your body every day!

Physical Activity

Staying physically active has many benefits. Exercise decreases the risk of developing cancer, heart disease, and diabetes. It also makes a person feel better. Exercise helps to:

- maintain an ideal body weight and prevent obesity by burning fat and reducing fat deposits
- decrease extra hormones that may promote cancer growth
- boost the body's natural defenses and strengthen the immune system
- increase muscle and bone strength
- improve mental health and a sense of well-being

According to American Institute for Cancer Research 2009,

Research Links Physical Activity with Reduced Cancer Risk

Physical activity is associated with an overall:

- 10% to 30% risk reduction for prostate cancer
- 30% to 40% risk reduction for breast, endometrial, and lung cancer
- 40% to 50% risk reduction for colon cancer.

Tip: Starting small can lead to big changes.

Consider the ABCs of healthy lifestyle choices.



A = Add

What can I do at this time, this day to improve my health?

B = Better

What better choice could I make?

C = Change

What change could I make to make this healthier?
What do I want or need to do to act on this?

The good thing about behaviors is once you stop them, they are over. It might be what you did yesterday, but it does not have to be what you do today. Once you resolve, "I'm not doing it anymore, I'm worth more than that", a new way of life begins. (Encouragement shared by Dione Harjo.)

Sexual Behavior

The following sexual behaviors increase the risk for developing cervical cancer:

- having sex before the age of 18, and
- having more than one sex partner.

Infection with some strains of the human papilloma virus (HPV) causes almost all cervical cancer in women. The HPV vaccine can help to prevent cervical cancer. This vaccine is given as a series of 3 shots over 6 months and works best if given before a woman becomes sexually active and is exposed to the HPV infection. The vaccine is approved for men and women ages 9 to 26 and is especially recommended for girls ages 11 and 12. No serious side effects have been found.

Pap smears continue to be a very important screening test to find changes in cells in a woman's cervix early before the cells have time to develop into cancer. Pap smears are still necessary even if a female receives the HPV vaccine. **HPV infection can occur in both male and female genital areas – even if a condom is being used.** The effectiveness of condom use in preventing HPV infection is not known. **However condoms continue to be an effective way to decrease the risk of other sexually transmitted infections (STIs).**

Tobacco

This section discusses non-ceremonial use of tobacco by American Indian peoples. **Smoking and chewing tobacco account for more deaths from cancer than all other known carcinogens combined.** A **carcinogen** is any substance known to cause cancer. Smoking cigarettes kills more Americans than alcohol, car crashes, suicide, AIDS, homicide, and illegal drugs combined. Tobacco use causes over 30% of all cancer deaths in the United States and 90% of lung cancers. Lung cancer is very difficult to treat. Less than 10% of lung cancer patients live 5 years after diagnosis.

In addition to lung cancer, tobacco use is also associated with the following cancers: nasopharynx (nose and back of throat), lip, oral cavity, pharynx (throat), larynx (voice box), mouth, throat, esophagus, stomach, colon/rectum, bladder, kidney, pancreas, breast, uterus, ovaries, cervix, and acute leukemia.

Tobacco use is the #1 cause of cancer. Decreasing or eliminating tobacco use is the key to reducing tobacco-related cancer disease and death.

Cancer Risk Factors & Prevention

Sexual Behavior

HPV can cause cancer in both male and female genital areas, mouth, and throat.

Stopping tobacco use now is the best thing you can do for your health and the health of your family and community.

It is never too late to stop!

Cancer Risk Factors & Prevention

Tobacco

Smoking and chewing tobacco account for more deaths from cancer than all other known carcinogens combined.

There are at least 43 chemicals in tobacco smoke known to cause cancer. These chemicals include: ammonia, acetone, arsenic, butane, ethanol, methane, and toluene, to name a few. The effects of tobacco use are increased if there is also exposure to asbestos or alcohol. Risk of cancer from asbestos increases significantly when combined with cigarette smoke. A person who uses both tobacco and alcohol has a much greater risk of developing cancer.

Secondhand smoke, also called passive or environmental tobacco smoke, is a mixture of the smoke given off by the burning end of tobacco products and the smoke exhaled by smokers, which can be inhaled by nonsmokers. It contains the same cancer-causing agents or carcinogens as the smoke inhaled by smokers.

Young children are particularly susceptible to secondhand smoke. **Exposure to secondhand smoke increases their risk for sudden infant death syndrome (SIDS), asthma, bronchitis, middle ear infections, and pneumonia.** People may be exposed to secondhand smoke in the home, car, workplace, and in public places such as bars and restaurants. Maintaining a smoke-free environment is the most effective method for reducing secondhand smoke exposure and the associated health risks.

What is the traditional role of tobacco among your people?



How is the sacred use of tobacco different from the habit of smoking or chewing tobacco?

Choosing Tobacco Free

Tobacco is a very addictive substance. Some people are able to stop smoking “cold turkey” without any help, but many people need support, encouragement, and careful planning. Nicotine Replacement Therapy and counseling are also available to help people stop using tobacco.

The tobacco quit line is a helpful resource for people to become tobacco free and the people who want to support their journey.

1-800-QUIT-NOW
(1-800-784-8669)

Tobacco Quit Tips: 1-800-QUIT-NOW

Notice when and why you use tobacco. Keep a notebook and write down with whom, what you are doing, and where you use tobacco.

Plan substitute activities to replace your tobacco habit: walking or other physical activities, listening to music or playing an instrument, things you enjoy doing with your hands.

Make a list of all the reasons you want to stop using tobacco. Keep the list with you so you can look at it often. Post it on mirrors, the refrigerator, and other places you see frequently.

Change your smoking habits: try to smoke with the opposite hand; smoke in only one place (outside!), and don't smoke in the car.

Buy only one pack of cigarettes or one can of chew. Switch to a brand you don't like. Put tobacco in an inconvenient place.

Ask a friend to quit using tobacco with you. If you cannot find one, ask a friend to support you.

Save \$\$ not used for tobacco in a clear jar; use money to reward yourself for making changes to be tobacco free.

Walk or do some form of exercise every day.

Set a quit date and make it happen!

Celebrate Your Choice to Be Tobacco Free

When you have the urge to use tobacco or overindulge in eating, drinking alcoholic beverages, or use other non-prescribed substances, **Practice the 5 D's:**

DELAY.

DRINK WATER.

DEEP BREATHE.

DISTRACT.

DO SOMETHING ELSE.

Be patient with yourself as you learn how to live without this addictive substance. Involve your family and friends. Some people may feel sleepier, irritable, or have cravings. Share the challenges you may experience with your family and friends to help them provide support and encouragement. Be prepared and know these symptoms will pass.

Celebrate your healthy choice to stop the habit of tobacco use.

When Smokers Quit:

Within 20 minutes of smoking that last cigarette, the body begins to heal.

After:

20 minutes: Blood pressure, pulse return to normal, temperature of hands and feet return to normal.

8 hours: Blood carbon monoxide level drops to normal. Blood oxygen level increases to normal.

24 hours: Heart attack risk decreases.

48 hours: Nerves start to restore. Ability to smell and taste improves.

2 weeks to 3 months: Circulation improves. Walking is easier. Lung function increases up to 30%.

1 to 9 months: Sinus congestion, coughing, fatigue, shortness of breath decrease. Cilia are restored in the lungs, increasing ability to handle mucus, clean the lungs, and reduce infection. Body's energy increases.

(American Cancer Society)

Keep your list of reasons for choosing to be tobacco free with you and read them frequently. Share them with friends and family so they can support and encourage you!

Cancer Risk Factors & Prevention

Motivational Interviewing

Support patients, family, and friends to choose healthy ways.

Practice the 5 A's

1. Ask
2. Advise
3. Assess
4. Assist
5. Arrange

Motivational Interviewing Skills

Motivational interviewing is a way to encourage and support people to make healthy choices. To change behavior a person needs to want to change their behavior. Motivational Interviewing is one way to invite people to think about change. Below are examples of questions for conversations about change.

Ask:

“Would it be OK with you if we discussed your tobacco use today?”

If a person says yes, continue with...

“On a scale of 0-10, how ready are you to consider stopping, with 0 being not ready at all and 10 being very ready?”

0	1	2	3	4	5	6	7	8	9	10
Not ready									Very ready	

Ask:

“Why did you choose the number you did and not another number?”

“Why did you pick a ____ (name the number they gave you) and not a ____ (name a number one or two points higher than the original number they gave you)”?

“What would need to be different to make you move to a higher number?”

When talking with the person, you want to:

- Draw out “change talk” or get the person talking about change without you telling them they should change. A sample question to start this is:
 - **How important is stopping tobacco use to you?**
- Find out what makes the person want to stop or not want to stop. Questions to ask are:
 - **What is it you like about using tobacco?**
 - **What is it you do not like about using tobacco?**
- After answering these questions, the person may move toward wanting to stop tobacco use. If the person chooses not to stop tobacco, you have started them thinking about it and he or she may return to discuss the option more with you. Offer your assistance and periodically remind them that you care and are available.

Individual Characteristics

Family history (heredity), gender, or age can influence a person's risk for developing cancer. People with individual characteristics that put them at increased risk for cancer may need to begin screening exams sooner than normally recommended.

Heredity

Currently, about 5% to 10% of cancers are linked to heredity. Only a few hereditary cancer genes related to specific cancers have been identified at this time. Cancers for which heredity is known to be a factor include: breast, colon/rectum, kidney, leukemia, ovary, testis, and a rare form of eye cancer (retinoblastoma).

It is helpful to know your family health history and if anyone in your family has had cancer, as well as the type of cancer and the person's age when they were diagnosed with cancer to tell your health care provider.

Gender

Women can develop cancers of the vagina, uterus, and ovaries, while men can develop cancers of the prostate, testicles, and penis.

Men and women can both get breast cancer.

Age

The risk of developing cancer increases with age. One of the reasons we are seeing more cancer is because people are living longer. **For most common cancers (breast, colorectal, and prostate), a person's risk increases after age 50.**

Elders experience about 60% of all new cancer diagnosis and 70% of cancer deaths.

Cancer Risk Factors & Prevention

Individual Characteristics

There are 7 wellness choices you can make to reduce your risk of developing cancer.

These healthy choices may prevent 2 out of 3 cancer deaths.

1. *Everyday eat 5 to 9 servings of fruits and vegetables. Eat foods low in fat.*
2. *Decrease alcohol intake or do NOT drink alcohol.*
3. *Choose to be tobacco free. Avoid exposure to second hand smoke.*
4. *Keep physically active. Maintain a healthy body weight.*
5. *Wear sun protection.*
6. *Prevent HPV.*
7. *Have recommended cancer screening exams.*

**Cancer Risk
Factors &
Prevention**

CAUTION

*Cancer
Warning Signs*

*Share your
traditional
stories to learn
wellness ways.*



C.A.U.T.I.O.N.

Cancer Warning Signs

(adapted from American Cancer Society, 1999, 2007).

The word CAUTION will help you to remember the following warning signs of cancer. Various signs are associated with cancer but they can also be symptoms of other diseases. Since these may indicate cancer or another condition, it is important if you notice changes within your body to see your health care provider. The following story invites us to learn wellness ways from our elders. Think about the stories you know and how they can support you or your patients along a pathway for wellness.

An Inupiaq elder studies the moon at night. Qungununa, his small granddaughter, asks “Aapa, why do you look at the moon and sky for such a long time?” Aapa tells her that the moon and sky are warning him of the coming winter storm and that he should take precautions when he goes out to hunt the next day. Little Qungununa asks how does the moon and sky speak to him. The elder replies “See the rainbow-like haze spread out far around the moon; when you see that it means watch out for coming blizzards.”

By becoming comfortable and knowledgeable about our bodies, it is easier to notice changes early which may be warning signs for diseases such as cancer. In this traditional story, Aapa shared his knowledge and wisdom about nature’s warning signs with his granddaughter. **His words did not “bring on” the blizzard but served as a warning to better prepare for future possibilities.** Aapa’s story helps us understand the importance of recognizing warning signs, not only in nature, but also in the health and wellness of our bodies. Knowing and observing changes within our bodies, and seeing and telling a health care provider, are important ways to keep our bodies strong and healthy.

As a CHA/P or CHR, you can learn about cancer warning signs and share “C.A.U.T.I.O.N.” with your patients and the people in your community. Help people become better prepared to find and report body changes early when they can be best treated!

C.A.U.T.I.O.N

Change in bowel or bladder habits

Changes in bowel function include diarrhea, constipation, size of stool, or blood in stool. Bladder changes include having trouble urinating and urinating more often than usual.

A sore that does not heal

This includes any open sore or irritation of the skin any where on the body, or sores that heal and then break down again. Cracks in and around the mouth which do not heal or persistent white patches in the mouth.

Unusual bleeding or discharge. Unusual menstrual bleeding, any bleeding between menstrual periods, blood in the urine, coughing or spitting up blood, or bleeding from the rectum or anus (may look black or red).

Unexplained weight loss. Weight loss that is not caused by dieting or exercise.

Thickening, lump, or swelling in the breast or any other part of the body

Persistence of swollen lumps or lymph nodes after several weeks.

Indigestion or difficulty swallowing

Any pain or difficulty in swallowing, a feeling of fullness, or persistent nausea and vomiting.

Obvious change in a wart or mole

Change in size, shape, thickness, or color of a mole or wart. Moles and freckles should not bleed or drain.

Nagging cough or hoarseness

Any new hoarseness or cough which does not go away or any change in a “smoker’s cough”.

Some signs are associated with cancer but they can also be signs of other health problems. It is important to discuss health changes with a health care provider.

Check Your Understanding answers from page 2-3:

1)F, 2)T, 3)T, 4)F, 5)T

Section 2

Cancer Risk Factors & Prevention

C.A.U.T.I.O.N.

Cancer Warning Signs

Remember, most cancers do not cause pain or other symptoms when they first start and are small.

Cancer Screening & Detection

Check Your Understanding

Screening is checking for cancer in a person who has no signs of disease.

Talk to your health care provider to learn what screening exams are recommended for you and when.

Cancer Screening & Detection

Check Your Understanding 

	TRUE	FALSE
1. All cancers can be detected at an early stage.		
2. Barriers to cancer screening exams may include lack of knowledge, fear of cancer, and modesty.		
3. The most common cancer among young men, ages 15 to 35, is testicular cancer.		
4. Early cancer detection includes having recommended cancer screening exams.		
5. Most breast lumps are cancer.		
6. Cervical cancer can be prevented.		
7. A colonoscopy is a screening exam used to find stomach cancer.		
8. There are often NO early symptoms of colorectal cancer.		

What can you do as a CHA/P, BHA, or CHR to support people in your community to have recommended wellness screenings to prevent cancer or find cancer early when it can be best treated?



Possibilities include:

- Tell people about recommended screening exams
- Listen to why people choose not to have a screening exam and help to decrease their barriers
- Offer to help make an appointment
- Offer to go to the appointment with the person
- Help to arrange or provide transportation to the appointment

Early Detection



Cancer Screening & Detection

What is early detection?

Early detection means finding cancer in its early stage, when it is limited to one area of the body, before it has time to spread beyond the organ where it first started to grow.

Survival rates improve when cancer is found and treated early.

Early Detection

Why is early detection important?

The goal of early detection is to find and remove or destroy cancer before it grows and spreads. This means finding the cancer before people start to have pain and other symptoms. Most cancers do not cause pain or other symptoms when they first start and are small. If found early, cancer can be treated more effectively and the person has a better prognosis or outcome.

*The BEST way
to treat cancer
is to find and
treat it EARLY!*

What are the basics of early detection?

Currently, not every cancer can be easily detected at its earliest stage by a screening exam. However, several screening exams and procedures have been developed for specific cancers. When screening exams are done as recommended, cancer can be found early before pain or symptoms occur. Cervical and colorectal cancers can be prevented by removing abnormal cervical cells and polyps in the colon early before they have time to become cancer. Screening guidelines may change for specific cancers. It is important to continue to update your knowledge. Talk with the health care providers at your clinic to learn what screening exams and how often are being recommended at your clinic to prevent or find changes early that may be cancer.

Basics of early detection are:

1. Having recommended screening exams regularly for specific cancers.
2. Recognize warning signs and see your health care provider immediately.

Cancer Screening & Detection

Screening Exams: Barriers

*If there is no
cancer, a
screening exam
can be
reassuring!*

*Early detection
is the first and
most important
step to survival.*

Screening Exams: Barriers & Benefits



Barriers to screening exams

By taking the time to listen and respect a person's concerns and identify barriers to screening tests and procedures, you can help decrease fear and increase understanding. A barrier to cancer screening is anything that makes it hard for a person to have a cancer screening exam. It is important to ask, listen, and learn what people feel are barriers to having wellness screening exams. Some barriers can be eliminated, while others are beyond your control. It is important to support and help people understand the importance of early cancer detection, provide appropriate services when available, and then allow each person to make her or his own health care choices to support wellness.

What are some cultural barriers that may affect people's choices about having screening exams?

Common barriers to screening exams may include:

Lack of Knowledge: Many people do not understand cancer or know about the importance of recommended cancer screening exams. Sharing information about methods of early detection, including when and how often screening exams are recommended, is helpful.

Fear of a Cancer Diagnosis: If cancer is present and a person avoids an early diagnosis and treatment the cancer will continue to grow. If there is no cancer, a screening exam can be reassuring! Some screening exams (Pap test, colonoscopy or sigmoidoscopy) help to prevent cancer by finding and removing abnormal cells before they become cancer. Early detection is the first and most important step to survival. When cancer is found and treated early, cure or remission is possible.

Modesty: Women or men can request a female or male provider or have a CHR or CHA/P, friend or family member be with them during the exam. Sometimes a person may have a history of sexual abuse, which may make a person uncomfortable with having an exam. Talking about a person's concerns and listening in a respectful and confidential manner is often helpful.

Not a Priority: Sometimes people say they are too busy or do not have enough time to have a screening exam, especially when they feel healthy. Others feel "it's not going to happen to me". Lack of child-care and transportation can also be barriers. A helpful way to support someone to have a screening exam is to lovingly encourage them to make an appointment and support them in ways needed for them to keep their appointment.

Recommendations for screening exams are based upon a person's age, risk factors, and family history. If warning signs are noticed it is important to see and tell your health care provider. Early cancers may have NO signs or symptoms.

It is important to encourage people to have regular, recommended screening exams when they feel healthy to stay healthy.

Benefits of having a screening exam

- You are including prevention in your pathway of wellness.
- You are actively taking care of your health.
- You may feel a sense of relief.
- You are a positive example for your family and friends.

Helpful ways to share information

1. Listen to a person's story and concerns.
2. Talk one-on-one with the person.
3. Be respectful.
4. Establish trust.
5. Be honest and share helpful experiences.
6. Explain information in ways the person understands.
7. Support people to hear information in new ways.
8. Invite people to share their ideas about what is hard to talk about or culturally taboo.
9. Have fun learning together!

Talking Points:

The sooner cancer is found and treated, the better a person's recovery. The chances that cancer will be found early are improved by having recommended screening exams and being aware of body changes. Cancer in its early stages can be present even if a person feels healthy and has no symptoms.

Colorectal screening is recommended for both men and women. Screening exams and tests for testicular and prostate cancers may be recommended for men. Breast and cervical screening exams are recommended for women.

Being aware of how your body looks and feels will help you notice changes early. Testicular self exams (TSE) and breast self exams (BSE) are two types of self-checks that help people to become more familiar with what is normal for their body.

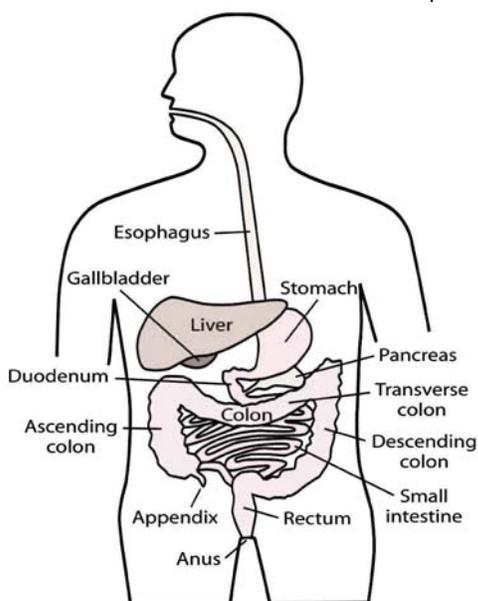
Cancer Screening & Detection

Screening Exams: Benefits

A health care provider can recommend the best screening plan based upon current guidelines, the person's age, medical history, family history and personal history of cancer.

Cancer Screening & Detection

Colorectal cancer may have NO signs or symptoms.



Men and Women's Health

Colorectal Cancer Screening

March is colorectal cancer awareness month.

The best way to prevent colorectal cancer is to have **recommended screening exams**. The words colorectal cancer mean cancer of the colon or cancer of the rectum. The colon, also called the large intestine, removes water and gets rid of body waste. The rectum is the lowest 5 to 6 inches of the digestive tract.

Colorectal cancer often starts quietly, with no warning. Don't wait for signs or symptoms! If not found early colorectal cancer may cause symptoms such as blood in your bowel movement, diarrhea, constipation or feeling like the bowel doesn't empty completely, frequent gas pains, bloating, fullness and/or cramping, always tired, and losing weight for no reason.

Why have a colorectal screening exam?

- Prevents cancer by finding and removing polyps, abnormal growths, before they become cancer.
- If there is already cancer, screening can find it early when it can be best treated.

Frequency: Men and women start colorectal screening at age 50. If you have a mother, father, sister, or brother who had colorectal cancer you need to begin screening at age 40 or younger. Talk with your health care provider.

The United States Preventive Task Force recommends against routine screening for people age 76 to 85 but some people may benefit. The task force does not recommend screening exams for people older than age 85.

Methods: Screening exams for colorectal cancer include:

1. A test for blood in the stool, Fecal Occult Blood Testing, every year, or
2. Sigmoidoscopy every 5 years with fecal occult testing between having a sigmoidoscopy or
3. Colonoscopy every 10 years to look at ALL the colon.

A **sigmoidoscopy** examines the rectum and the descending colon or sigmoid colon. If a polyp is found during a sigmoidoscopy, a colonoscopy will need to be done to check ALL of the colon. Polyps are not usually removed during a sigmoidoscopy.

A **colonoscopy** examines the rectum and ALL of the colon. A mild sedative may be given for a colonoscopy. During the exam, your health care provider may remove polyps or small pieces of tissue, called a biopsy. A biopsy is examined under a microscope to look for cancer cells by a specially trained doctor, called a pathologist.

Before either procedure, patients are given a 'prep' –medications to completely empty the colon so the tissue lining of the bowel and rectum can be seen. Both procedures use a flexible fiber-optic scope to see the inside lining of the colon and rectum.

Skin Cancer Screening

May is skin cancer awareness month.

To protect skin from the sun's harmful rays, people wear protective clothing, hats and long sleeve shirts, and sunscreen with a SPF (sun protection factor) of 15 or more. Using tanning booths is **not** recommended.

Moles: For concerns about a mole use the ABCD method to help decide if it needs to be checked by a provider. If you answer yes to the following questions, have the mole checked by a provider.

A=Asymmetry Does the mole look different on either side?

B=Border Is the border jagged or uneven?

C=Color Are there varied colors in the same mole?

D=Diameter Is the mole growing?

Sores: Any sore that does not heal needs to be reported.

If a person has a rash on one nipple and not the other nipple and the rash is not getting better, and is not responding to medical treatment, it may be Paget's disease a type of breast cancer. The person needs to be seen by their health care provider.

Men's Health

Prostate Screening

September is prostate cancer awareness month.

The prostate is a gland surrounding the neck of the bladder and the urethra. The prostate gland adds fluid to sperm.

Frequency: It is helpful for men to talk with their provider to learn what is best for their health. Guidelines for routine screening may vary. A prostate-specific antigen (PSA) blood test and a digital rectal examination (DRE) may be recommended yearly for men starting at age 50. For men with a family history of prostate cancer, prostate screening may begin at age 40 or 10 years before the person's father or brother was diagnosed with prostate cancer.

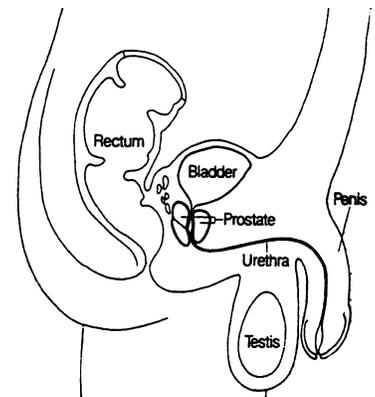
There is not agreement that every man age 50 and older should have prostate cancer screening but there is agreement that every man age 50 and older should discuss this with his provider. Ask men ages 50-75 without a family history of prostate cancer if they have discussed the risks and benefits of prostate screening with their provider. The United States Preventive Task Force does not recommend prostate screening for men older than age 75.

Method: A blood test may be ordered to screen for prostate cancer. The PSA level may be elevated in men who have prostate cancer, an enlarged prostate, or an infection in the prostate. For more accurate results, the blood test is done before doing a digital rectal exam. A rectal exam is done to feel for abnormal lumps in the prostate, which may be cancer. The health care provider puts a gloved finger into the patient's rectum to feel the prostate through the wall of the rectum and check for any hard or lumpy areas. The man may feel mild pressure in his rectal area during the procedure.

Cancer Screening & Detection

Prostate Screening

An elevated PSA blood test does not mean you have prostate cancer, but it does require further evaluation.

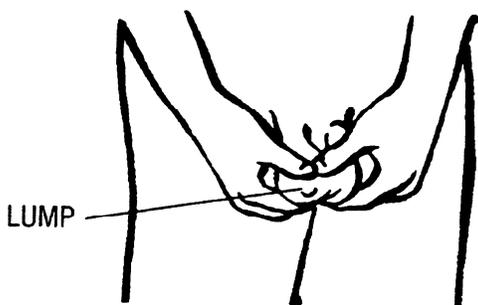


Cancer Screening & Detection

Testicular Cancer

*Testicular
cancer is rare,
but it is the
most common
cancer in men
ages 15 to 35.*

NOTE: The epididymis, the soft tube-like structure at the back of the testes, should not be confused with a tumor.



Testicular Health

April is testicular cancer awareness month. Testicular cancer is among the most curable types of cancer when diagnosed and treated early. Teaching young men about testicular self-exams and the importance of early detection and treatment can save a young man's life. The testicles are the organs in males that produce sperm and the male hormone, testosterone. They are suspended from the body in the scrotal sac behind the penis.

What are the risk factors?

Men who are born with an undescended testicle (the testicle has not moved down into the scrotum where it belongs) have a 5 times higher risk of developing testicular cancer. If the testicle does not move into the scrotum by itself within the first year of life, it may require surgery. Men with a father or brother who had testicular cancer have a higher risk for developing testicular cancer. Men who have had testicular cancer in one testicle are at a higher risk of developing cancer in the other testicle.

Signs of testicular cancer may include the following:

- A painless lump or irregularity in either testicle.
- A change in the size or shape of a testicle.
- Swelling or feeling of heaviness in the testicle.
- Pain or discomfort in the testicle.
- Pain or discomfort in the lower abdomen or groin.

Not all abnormal conditions are testicular cancer, but it is important for young men to report any changes to their health care provider for an exam and evaluation.

Testicular Exam

Men do a testicular exam once a month after a warm bath or shower. The heat causes the scrotal skin to relax, making it easier to feel anything unusual about the testes. If a man does a monthly exam he will learn what his testicles normally feel like and will be able to identify any changes in the tissue early. A monthly testicular exam can increase the chances of finding abnormal changes in the testicles early which may be cancer.

To do a testicular self exam, examine each testicle separately. Using both hands, hold the testicle between the thumbs and fingers. Apply gentle pressure to feel each testicle on all sides. A normal testicle is egg-shaped, somewhat firm to touch, and should be smooth and free of lumps. Feel for lumps and areas of unusual firmness anywhere on the testicle. Abnormal lumps are usually painless and about the size of a pea. If an abnormality is found, tell your health care provider immediately. When testicular cancer is found early, it is one of the most curable cancers.

Women's Health



Breast Health

October is breast cancer awareness month. Breast self awareness, clinical breast exams (CBE), and mammograms are three ways for women to find breast changes early that may be breast cancer.

An effective breast exam has two important parts: 1) looking at the breasts and 2) feeling the breast tissue for changes and swollen lymph nodes under the arm and above and below the collarbone.

A woman of any age should see her health care provider if she notices

- a breast lump
- a change in one breast and not the other
- change in breast skin color
- puckering or dimpling of the breast
- spontaneous nipple discharge or leaking (not breast milk)
- a rash or crusting on one nipple and not the other nipple
- turning in or inversion of the nipple that used to be pointed outward.

Although 8 out of 10 breast lumps are not cancer, you cannot tell just by looking. It is important to report all changes to a health care provider.

A woman's risk of developing breast cancer increases with age. Over half of all women diagnosed with breast cancer are over age 50. Just being a woman and getting older are the two biggest risk factors for developing breast cancer. Other breast cancer risk factors include:

- A first degree relative (mother, father, sister, brother, or child) with breast cancer.
- Personal history of breast cancer.
- Having no children or giving birth after age 30.
- Early menarche (less than 12 years of age).
- Late menopause (greater than 55 years of age).

Being overweight, eating a high fat diet, drinking alcohol, and using tobacco increase a person's risk of developing breast cancer.

Breast Self Awareness

Breast self checks help people become comfortable and knowledgeable in the way their breasts normally look and feel.

Cancer Screening & Detection

Breast Exams

Breast self awareness, clinical breast exams, and mammograms all help to find breast cancer early when it can be best treated.

Cancer Screening & Detection

Breast Exam

The shape, size, and feel of breasts will be influenced by monthly menstrual cycles, childbirth, breast-feeding, birth control pills, hormone replacement therapy, menopause, weight changes, and age. The key for people is to learn what is normal for them and to notice changes early to discuss with their health care provider.

Frequency: A woman examines her breasts every month, at the same time each month. For a woman who is still menstruating, it is best to do a breast exam 3-5 days after her menstrual period is over. Breast tissue is less sensitive and less lumpy at this time. Women who are no longer having menstrual periods can pick a day that is easy to remember, such as the first day of the month, her day of birth, or when she pays the bills.

If a woman does regular breast exams she will become more comfortable and confident with her skills to see or feel changes in her breast tissue early.

Clinical Breast Exam (CBE)

A clinical breast exam is done by a trained health care provider. The health care provider looks at and feels the breast tissue for any changes or abnormalities.

Frequency: A CBE is done every three years for women ages 20 to 39 and every year for women 40 and older.

The Breast Lump Necklace

Materials Needed:

Two: 3/16" beads

These lumps are the average size of lumps found by regular and repeat mammograms

Two: 3/8" beads

This is the average size lump found by first mammograms

Two: 1" beads

This is the average size lump found by occasional breast self exams

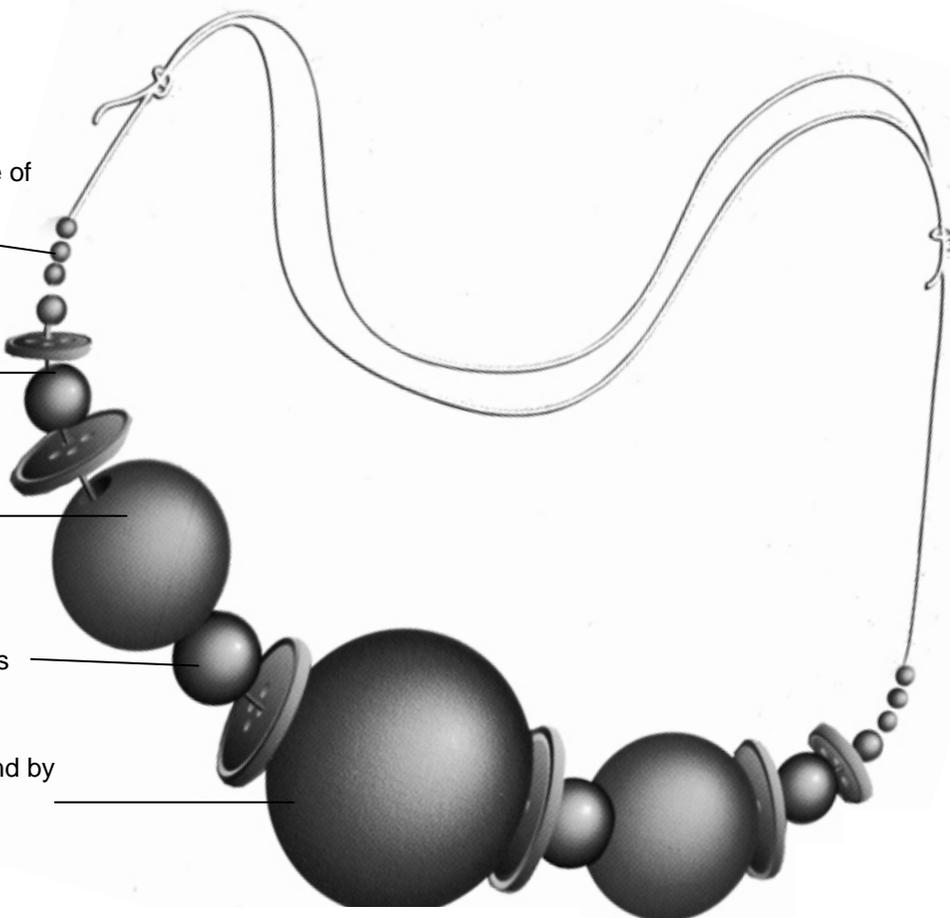
Two: 1/2" beads

This is the average size lump found by regular breast self exams

One: 1 1/2" bead

This is the average size lump found by women untrained in breast exams

Use buttons for spacing.



Mammograms

A mammogram is a special x-ray of the breast. Two x-rays are taken of each breast: one is top to bottom, and the other is side to side. More views may be needed if the person's breasts are large or if the mammogram is being done to check a suspicious lump. The mammogram is done by a radiology technologist, who is trained and licensed to do mammograms.

Do not wear deodorant or talcum powder before having a mammogram. The aluminum in deodorant may interfere with the mammogram results.



Frequency: The United States Preventive Task Force and the National Cancer Institute recommend women begin having screening mammograms every 1-2 years at age 40. The American Cancer Society recommends women have a mammogram every year beginning at age 40.

If a woman's mother, father, brother, or sister was diagnosed with breast cancer, the woman may need to begin having earlier screening exams, 10 years before the age the relative was diagnosed. If the woman's mother was diagnosed with breast cancer at age 40 the woman may need to begin screening at age 30. If the family member was diagnosed at age 60, the woman still needs to begin having a screening mammogram at age 40.

A mammogram can find a lump when it is the size of a small seed, before it can be felt by a woman or her health care provider.

Mammography may miss some breast changes. For this reason, a woman is encouraged to do regular, breast self exams and have regular clinical breast exams by her health care provider.

Men who notice a breast lump or other changes of concern need to see their health care provider for a complete exam. Men with a breast health concern may have a mammogram to help identify abnormal breast changes.

Cancer Screening & Detection

Mammograms

A mammogram can find breast changes early before they can be felt.

Cancer Screening & Detection

Mammogram Questions

*Finding breast
changes early
is important for
breast cancer
treatment and
survival.*

Common Questions about Mammograms

Why should I get a mammogram if my breasts feel fine?

A mammogram can find breast changes which may be cancer before they can be felt. A yearly mammogram is an opportunity for a woman to take care of herself, stay healthier longer, and become a role model for her family and friends. It is much easier to treat breast cancer when it is found early.

Does having a mammogram hurt?

A mammogram may cause discomfort while the breasts are being compressed for the x-ray. The pressure is necessary to take the best x-ray or picture of the breast tissue. Compression does not damage breast tissue in any way. Any discomfort will be short term. Ways to reduce discomfort include taking a Tylenol before your mammogram or scheduling the mammogram 3-5 days after a menstrual period when breast tissue is less tender.

Will the radiation from a mammogram cause cancer?

The amount of radiation exposure from a mammogram is very low. The radiation that you receive during one mammogram is the same amount you receive from your natural surroundings during a 3 month period of time. (American Cancer Society)

If no one in my family has had breast cancer do I still need to be concerned about developing breast cancer?

Yes, even if no one in your family has had breast cancer it is an important part of your health care to have clinical breast exams and a mammogram every year once you turn 40. About 90% to 95% of women who develop breast cancer do not have a family history of breast cancer. Breast cancer is the most commonly diagnosed cancer among all women. The biggest risk factor for developing breast cancer is just being a woman.

What if there is a history of breast cancer in my family?

Talk with your family to learn your family medical history. Through our family we pass on our traditions and stories about ways to live strong and healthy. We also pass on our genes.

Cancer can be in families. Learn if someone in your family has had cancer, what kind of cancer, and at what age they were diagnosed.

People with a first degree blood relative (mother, father, sister, brother, son, or daughter) with breast cancer are at higher risk for developing breast cancer. About 5% to 10% of breast cancers are linked to genes known specifically to cause breast cancer. It is important to discuss your family history with your health care provider, get regular mammograms (you may be advised to start before age 40), have yearly clinical breast exams, and do monthly self breast exams.

If there is a lump in my breast, does that mean I have breast cancer?

Not necessarily. 8 out of 10 lumps found in the breast are benign (not cancer). But you cannot tell if it is cancer just by feeling. A tissue biopsy is the only way to know for sure if a lump is cancer.

Why do I need to get a mammogram every year?

Mammograms can show breast changes, which may be cancer even before they can be felt on exam. By comparing mammograms each year, it makes it easier for the radiologist to see early changes in the breast tissue which may be cancer.

Cervical Health

A Pap test can prevent cervical cancer by finding changes in the cells before they become cancer.

For the Pap test, the health care provider places a speculum in the vagina to see the cervix. A sample of cells is collected from the cervix and examined under a microscope for cancer or other abnormal cells. By finding and treating abnormal cervical cells early, cervical cancer can be prevented.

During the pelvic exam, the health care provider feels for any change in size or shape of the uterus, vagina, ovaries, fallopian tubes, and bladder. This exam is done by placing the gloved index and middle fingers of one hand into the vagina while the other hand is placed gently and firmly on the abdomen to feel the pelvic organs.

Current guidelines (2012) recommend women have Pap tests every 3 years age 21-65. If you have an abnormal Pap result you will need to be screened more frequently.

Women should talk with their health care provider about how often to be screened.

Risk factors for cervical cancer include: having HPV, more than 1 sex partner, and using tobacco.

If the Pap smear is abnormal or “unsatisfactory”, it is very important that the woman returns for another exam. “Unsatisfactory” result means the laboratory did not have enough cells for the test to be completed or the specimen was handled incorrectly. If the Pap showed an abnormal result, it could be due to an infection or irritation of the cervix or a precancerous condition. The woman needs to return for a repeat exam to determine the cause and be treated if necessary. It is very important to complete follow-up visits.

When a woman’s Pap is abnormal, a **colposcopy exam** may be recommended. A colposcopy is a visual examination of the cervix using a vaginal speculum, bright light, and special binoculars to magnify a woman’s cervix. During colposcopy, a biopsy may be taken of cervical tissue that looks abnormal. This tissue is then looked at under a microscope by a specially trained doctor called a pathologist.

Common Questions about Cervical Health

Could I have cancer of the cervix and not know it?

Yes. There is usually no pain or symptoms, such as bleeding or discharge, during the early stage of cervical cancer. Therefore it is important to have Pap tests as recommended by your health care provider.

Does a Pap test hurt?

Women may experience a small amount of cramping or discomfort during a pelvic exam and Pap test. However, the procedure takes very little time and it can save a woman’s life.

Cancer Screening & Detection

Cervical Health

A woman begins having Pap tests at age 21 regardless of when she becomes sexually active.

(ACS, NCI 2012 guidelines)

Women ages 21-65 should be screened every 3 years, if they have normal Pap results.

Cancer Screening & Detection

Cervical Health

There is a vaccine to help prevent cervical cancer.

Ask your health care provider to learn more about the HPV vaccine.

Why do women have to get Pap tests after they stop having children and go through menopause?

Cervical cancer can happen to a woman at any age. Regular Pap tests can find cervical changes early before they become cancer.

Does a woman who has had a hysterectomy need to have Pap tests?

A woman needs to discuss her situation with her health care provider. The answer depends upon the reason she had the hysterectomy.

Exciting news! There are vaccines to prevent the majority of cervical cancers!

HPV, or the human papilloma virus, causes nearly all cervical cancers. There are about 35 different types of HPV, and not all types of HPV cause cervical cancer. HPV is transmitted through sexual contact. If girls and women are vaccinated prior to their first sexual experience, the majority of cervical cancers can be prevented.

The vaccine is most effective when given before a person is exposed to HPV. Consequently, the vaccine is especially recommended for girls ages 11 and 12 before they become sexually active to prevent becoming infected with HPV at some time in their life. At this time, the HPV vaccine is approved for men and women ages 9 to 26.

The vaccine is given in a series of 3 shots over a 6-month period. The second and third dose should be given 2 and 6 months after the first dose. No serious side effects have been reported. The most common side effect is a brief soreness at the injection site.

Women who have the HPV vaccine still need to have recommended Pap smears because the vaccine only provides protection for the 4 most common types of HPV that cause the majority of cervical cancers.

It is important to talk with your health care provider and learn more about this vaccine. You can also learn more on the Center for Disease Control (CDC), American Cancer Society (ACS) and National Cancer Society (NCI) websites.

Talk with your health care team and community members about culturally respectful ways to share this information with the people in your community to prevent the majority of cervical cancers.

Check Your Understanding answers from page 2-16:

1)F, 2)T, 3)T, 4)T, 5)F, 6)T, 7)F, 8)T